

FINANCIAL AFFIDAVIT	
IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE	
IN THE CASE OF <u>VS</u> v.s. <u>Cruzito</u>	FOR AT <div style="float: right; border: 1px solid black; padding: 2px; width: 150px;">LOCATION NUMBER</div>
PERSON REPRESENTED (Show your full name) <u>Romane Cruzito</u>	<div style="float: right; border: 1px solid black; padding: 2px; width: 150px;">DOCKET NUMBERS</div> <div style="clear: both;"></div>
CHARGE/OFFENSE (describe if applicable & check box →) <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor	<div style="float: right; border: 1px solid black; padding: 2px; width: 150px;">Magistrate <u>04M-1033 JGD</u> District Court Court of Appeals</div> <div style="clear: both;"></div>

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now employed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed	Name and address of employer: _____ IF YES, how much do you earn per month? \$ _____ IF NO, give month and year of last employment _____ How much did you earn per month? \$ _____
	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____		
ASSETS	OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES <div style="display: flex; justify-content: space-between;"> <div>RECEIVED <u>22,000</u></div> <div>SOURCES <u>Restaurant job</u></div> </div>
	CASH	Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>100.</u>	
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT <div style="display: flex; justify-content: space-between;"> <div>VALUE <u>1500</u></div> <div>DESCRIPTION <u>1995 Honda</u></div> </div>	

DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them		
	<input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	1	<u>Edwarte Cruzito (father)</u> _____ _____		
OBLIGATIONS & DEBTS	DEBTS & MONTHLY BILLS <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>	APARTMENT OR HOME:	Creditors	Total Debt	Monthly Paymt.
	<div style="display: flex; justify-content: space-between;"> <div> <u>Rent</u> <u>child support</u> <u>Macy's</u> </div> <div> \$ _____ \$ _____ \$ _____ \$ <u>160.</u> </div> </div>				<u>250.</u> <u>100.</u> _____ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

March 16, 2004SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)
